The bill was ordered to be engrossed and read a third time, was read a third time by title.

The question being put, viva voce, Will the House pass said bill?

The SPEAKER pro tempore, Mr. SHARP, announced that the yeas had it

So the bill was passed.

A motion to reconsider the vote whereby said bill was passed was, by unanimous consent, laid on the table.

Ordered, That the Clerk request the concurrence of the Senate in said bill.

### $\P122.21$ Waiving points of order

AGAINST THE CONFERENCE REPORT ON S. 1569

Mr. MOAKLEY, by direction of the Committee on Rules, called up the following resolution (H. Res. 574):

Resolved, That upon adoption of this resolution it shall be in order to consider the conference report to accompany the bill (S. 1569) to amend the Public Health Service Act to establish, reauthorize and revise provisions to improve the health of individuals from disadvantaged backgrounds, and for other purposes. All points of order against the conference report and against its consideration are waived. The conference report shall be considered as read.

When said resolution was considered. After debate,

On motion of Mr. MOAKLEY, the previous question was ordered on the resolution to its adoption or rejection and under the operation thereof, the resolution was agreed to.

A motion to reconsider the vote whereby said resolution was agreed to was, by unanimous consent, laid on the table.

### ¶122.22 RECESS—4:53 P.M.

The SPEAKER pro tempore, Mr. SHARP, pursuant to clause 12 of rule I, declared the House in recess at 4 o'clock and 53 minutes p.m., subject to the call of the Chair.

### ¶122.23 AFTER RECESS—5:00 P.M.

The SPEAKER pro tempore, Mr. GONZALEZ, called the House to order.

# ¶122.24 MINORITY HEALTH IMPROVEMENTS

Mr. WAXMAN, pursuant to House Resolution 574, called up the following conference report (Rept. No. 103–843):

The committee of conference on the disagreeing votes of the two Houses on the amendments of the House to the bill (S. 1569), to amend the Public Health Service Act to establish, reauthorize and revise provisions to improve the health of individuals from disadvantaged backgrounds, and for other purposes, having met, after full and free conference, have agreed to recommend and do recommend to their respective Houses as follows:

That the Senate recede from its disagreement to the amendment of the House to the text of the bill and agree to the same with an amendment as follows:

In lieu of the matter proposed to be inserted by the House amendment, insert the following:

### SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Minority Health Improvement Act of 1994".

(b) Table of Contents.—The table of contents for this Act is as follows:

Sec. 1. Short title: table of contents.

TITLE I—OFFICES OF MINORITY HEALTH; ASSISTANT SECRETARY FOR CIVIL RIGHTS

Sec. 101. Revision and extension of programs of Office of Minority Health.

Sec. 102. Establishment of individual offices of minority health within agencies of Public Health Service.

Sec. 103. Assistant Secretary of Health and Human Services for Civil Rights.

TITLE II—PRIMARY HEALTH SERVICES

Sec. 201. Migrant health centers; community health centers.

Sec. 202. Health services for the homeless.

Sec. 203. Health services for residents of public housing.

Sec. 204. Grants to States for loan repayment programs regarding obligated service of health professionals.

Sec. 205. Grants to States for operation of State offices of rural health.

Sec. 206. Demonstration grants to States for community scholarship programs regarding obligated service of health professionals.

Sec. 207. Programs regarding birth defects.

Sec. 208. Healthy start for infants.

Sec. 209. Demonstration projects regarding diabetic-retinopathy.

Sec. 210. Issuance of regulations regarding language as impediment to receipt of services.

# TITLE III—HEALTH PROFESSIONS PROGRAMS

Sec. 301. Primary care scholarships for students from disadvantaged backgrounds.

Sec. 302. Scholarships generally; certain other purposes.

Sec. 303. Loan repayments and fellowships regarding faculty positions.

Sec. 304. Centers of Excellence.

Sec. 305. Educational assistance regarding undergraduates.

Sec. 306. Student loans regarding schools of nursing.

Sec. 307. Federally-supported student loans funds.

Sec. 308. Area health education centers.

TITLE IV—RESEARCH

Sec. 401. Office of Research on Minority Health.

Sec. 402. Activities of Agency for Health Care Policy and Research.

Sec. 403. Data collection by National Center for Health Statistics.

### TITLE V—NATIVE HAWAIIAN HEALTH CARE

Sec. 501. Clarification of 1992 amendments. Sec. 502. Amendment of Native Hawaiian Health Care Improvement Act

to reflect 1992 agreement. Sec. 503. Repeal of Public Health Service Act provision.

### TITLE VI—WOMEN'S HEALTH

Sec. 601. Establishment of Office of Women's Health.

Sec. 602. Women's scientific employment regarding National Institutes of Health.

Sec. 603. Information and education regarding female genital mutilation.

Sec. 604. Study regarding curricula of medical schools and women's health conditions.

### TITLE VII—TRAUMATIC BRAIN INJURY

Sec. 701. Programs of Centers for Disease Control and Prevention.

Sec. 702. Programs of National Institutes of Health.

Sec. 703. Programs of Health Resources and Services Administration.

Sec. 704. Study; consensus conference.

## TITLE VIII—MISCELLANEOUS PROVISIONS

Sec. 801. Technical amendment to Indian Health Care Improvement Act.

Sec. 802. Health services for Pacific Islanders.

Sec. 803. Technical corrections regarding Public Law 103–183.

Sec. 804. Certain authorities of Centers for Disease Control and Prevention.

Sec. 805. Establishment of public health analytical laboratory.

Sec. 806. Administration of certain requirements.

Sec. 807. Revisions to eligibility requirements for entities subject to drug pricing limitations.

Sec. 808. Demonstration projects regarding Alzheimer's disease.

Sec. 809. Technical corrections relating to health professions programs.

Sec. 810. Clinical traineeships.

HEALTH.

Sec. 811. Construction of regional centers for research on primates.

TITLE IX—GENERAL PROVISIONS

Sec. 901. Effective date.

#### TITLE I—OFFICE OF MINORITY HEALTH; ASSISTANT SECRETARY FOR CIVIL RIGHTS

# RIGHTS SEC. 101. REVISION AND EXTENSION OF PROGRAMS OF OFFICE OF MINORITY

(a) IN GENERAL.—Section 1707 of the Public Health Service Act (42 U.S.C. 300u-6) is amended by striking subsection (b) and all that follows and inserting the following:

"(b) DUTIES.—With respect to improving the health of racial and ethnic minority groups, the Secretary, acting through the Deputy Assistant Secretary for Minority Health (in this section referred to as the 'Deputy Assistant Secretary'), shall carry out the following:

"(1) Establish short-range and long-range goals and objectives and coordinate all other activities within the Public Health Service that relate to disease prevention, health promotion, service delivery, and research concerning such individuals. The heads of each of the agencies of the Service shall consult with the Deputy Assistant Secretary to ensure the coordination of such activities.

"(2) Carry out the following types of activities by entering into interagency agreements with other agencies of the Public Health Service:

"(A) Support research, demonstrations and evaluations to test new and innovative mod-

"(B) Increase knowledge and understanding of health risk factors.

C) Develop mechanisms that support better information dissemination, education, prevention, and service delivery to individuals from disadvantaged backgrounds, including individiuals who are members of racial or ethnic minority groups.

"(D) Ensure that the National Center for Health Statistics collects data on the health

status of each minority group.

"(E) With respect to individuals who lack proficiency in speaking the English language, enter into contracts with public and nonprofit private providers of primary health services for the purpose of increasing the access of the individuals to such services by developing and carrying out programs to provide bilingual or interpretive services.

"(3) Support a national minority health resource center to carry out the following:

"(A) Facilitate the exchange of information regarding matters relating to health information and health promotion, preventive